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Application No. (if known): 09/647,368

Attorney Docket No.: 449122000900

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Amendment;  
Three Month Extension of Time;  
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Substitute Specification (marked and clean versions); and  
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FEE TRANSMITTAL for FY 2004 <small>Effective 10/01/2003, Patent fees are subject to annual revision.</small>		Complete if Known		
		Application Number	09/647,368	
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		Filing Date	February 23, 2001	
		First Named Inventor	Bernhard BAUER et al.	
		Examiner Name	James A. Demakis	
TOTAL AMOUNT OF PAYMENT (\$)		950.00	Attorney Docket No.	449122000900
METHOD OF PAYMENT (check all that apply)		FEE CALCULATION (continued)		
<input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None		3. ADDITIONAL FEES		
<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 03-1952 Deposit Account Name: Morrison & Foerster LLP		Large Entity Small Entity		
The Director is authorized to: (check all that apply)		Fee Code Fee (\$)		
<input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Credit any overpayments		Fee Code Fee (\$)		
<input type="checkbox"/> Charge any additional fee(s) during the pendency of this application		Fee Description		
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FEE CALCULATION				
1. BASIC FILING FEE				
Large Entity Small Entity				
Fee Code Fee (\$)				
1001 770 2001 385 Utility filing fee				
1002 340 2002 170 Design filing fee				
1003 530 2003 265 Plant filing fee				
1004 770 2004 385 Reissue filing fee				
1005 160 2005 80 Provisional filing fee				
SUBTOTAL (1) (\$)				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE				
Total Claims 10 - ** =				
Independent Claims 1 - ** =				
Multiple Dependent				
Large Entity Small Entity				
Fee Code Fee (\$)				
1202 18 2202 9 Claims in excess of 20				
1201 86 2201 43 Independent claims in excess of 3				
1203 290 2203 145 Multiple dependent claim, if not paid				
1204 86 2204 43 ** Reissue independent claims over original patent				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent				
SUBTOTAL (2) (\$)		00.00		
**or number previously paid, if greater; For Reissues, see above				
SUBMITTED BY		(Complete if applicable)		
Name (Print/Type) Kevin F. Spivak		Registration No. (Attorney/Agent) 43,148		
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		Date October 14, 2003		

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